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## APPLICANTS

Masami Amemiya, Tokyo, JAPAN;

Masato Ozeki, Tokyo, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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Verified and Acknowledged				

## ADDRESS

28289  
 THE WEBB LAW FIRM, P.C.  
 700 KOPPERS BUILDING  
 436 SEVENTH AVENUE  
 PITTSBURGH, PA  
 15219

## TITLE

X-ray analyzer

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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